

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	1					
6		3				
7		3				
8		2				
9	1					
10	1					
11	1					
12	1					
13	1					
14		5				
15		0				
16		5				
17		3				
18		3				
19		2				
20		0				
21		0				
22		0				
23	1					
24	1					
25	1					
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48						
49						
50						
TOTAL IND.	45					
TOTAL DEP.	30					
TOTAL CLAIMS	44					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

BEST AVAILABLE COPY